ETHICS DISCLOSURE STATEMENT

CONFLICTS OF INTEREST – DECISIONS AND VOTING
State Form 55860 (R / 10-15)
OFFICE OF THE INSPECTOR GENERAL
IC 4-2-6-9

INDIANA STATE ETHICS COMMISSION

JAN 17 2017

FILED

In accordance with IC 4-2-6-9, you must fill days after the conduct that gives rise to the agency appointing authority and ethics office General's website.	e conflict. You must also includ	de a copy o	of the notification provi	ded to your	
Name (last)	Name (first)		Name (middle)		
Maupin	Natalie		М		
Name of office or agency		Job title			
Indiana Department of Environmental Management		Senior Environmental Manager			
Address of office (number and street) 100 N. Senate Ave		City Indianapolis		ZIP code 46204	
Office telephone number (317) 232-8729	Office e-mail address (required) nmaupin@idem.in.gov				
Describe the conflict of interest:					
I have interviewed for an Environmental Coordinal	tor position within Citizens Energy	Group (Citizo	ens). Citizens owns and o	perates the City of	
Indianapolis' water and wastewater utilities under the name CWA Authority. As the Pretreatment Compliance Coordinator for the					
Office of Water Quality, I audit CWA Authority's for compliance with its EPA approved pretreatment program. I also review their					
Quarterly Noncompliance Reports, Annual Reports and review their Sewer Use Ordinance. I have informed the agency's					
Commissioner and Ethic's Officer of the s	ituation. I have instituted a se	creen to e	nsure that I have no i	nvolvement with	
any matters involving CWA Authority during the interview and potential negotiation process.					
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Describe the screen established by your ethics officer: (Attach additional pages as needed.)  I will have no direct or indirect involvement in any matter related to Citizen's Energy Group	o/CWA Authority. I will recuse
myself from any portion of a meeting in which discussions related to Citizen's Energy Grou	up/CWA Authority are discussed
or expected to be discussed. I will not discuss any matter involving Citizen's Energy Grou	p/CWA Authority with any IDEM
employee. I will not discuss any files or participate in any decisions regarding or relating to	o Citizen's Energy Group/CWA
Authority.	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
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AFFIRMATION	. d % -
Your signature below affirms that your disclosures on this form are true, complete, and conknowledge and belief. In addition to this form, you have attached a copy of your written dis	· · · · · · · · · · · · · · · · · · ·
appointing authority and ethics officer.	isiosais to your agonoy
Signature of state officer, employee or special state appointee	Date signed (month, day, year) 1-13-17
Printed full name of state officer, employee or special state appointee	
Natalie Maupin	
FOR ETHICS OFFICER USE ONLY	
Your signature below affirms that you have reviewed this disclosure form and that it is true, best of your knowledge and belief. You also attest that your agency has implemented the s	
Signature of ethics officer  Pathlese Mills	Date signed (month, day, year) 1-13-17
Printed full name of ethics officer Kathleen Mills	

## MAUPIN, NATALIE

From:

MAUPIN, NATALIE

Sent:

Tuesday, January 10, 2017 10:26 AM

To:

PIGOTT, BRUNO; STANIFER, MARK; STARKS, GARY

Cc:

MILLS, KATHLEEN

Subject:

Potential Post Employment Opportunity

All,

I am emailing you all at the advisement of Kathy Mills (IDEM's Ethics Officer) to notify you that I have applied for an Environmental Coordinator position with Citizens Energy Group. To help avoid any potential conflicts of interest during this process, I will not be able to respond to any compliance issues related to CWA Authority's (Indy's) pretreatment program. Kathy is going to help me prepare a screening memo this afternoon that will be shared with all of you. In addition, I will be completing a disclosure form with OIG to protect myself and IDEM from violating any ethics laws.

Thank you, Natalie

Natalie Maupin
Pretreatment Compliance Coordinator
Compliance Evaluation Section
Office of Water Quality
Indiana Department of Environmental Management
(317)232-8729